

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No 1215-0188 Expires 11 30-2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT
E S DOL	
(AUG 222005)	
1 File Number U 9559 MS DPOP	2. Fiscal Year Covered From
9554	1 / 1 / 2004 Through 12 / 31 / 2004
3 Name and address of person filing	4 Name file number and address of labor organization
Name Stephen T King	Name IUPAT Local Union 79
	Labor Organization File Number 025-503
P O Box Bldg Room No If any	PO Box Building and Room Number if any
Street 8681 Edison Street	Street 2170 S Lipan Street
City Denver	City Denver
State CO	State CO ZIP Code + 80223-4012
5 Position in labor organization financial secretary	
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)	
A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest, Transaction or Income
Name N/A	
	N/A
Trade Name if any N/A	N/A
Trade Name if any N/A PO Box Bldg Room No if any N/A	N/A
- N/A	N/A 7 b Amount.
- N/A	
PO Box Bldg Room No if any N/A	
PO Box Bldg Room No if any N/A Street N/A	
P O Box Bldg Room No if any N/A Street N/A City N/A State, ZIP Code + 4	
P O Box Bidg Room No if any N/A Street N/A City N/A State, ZiP Code + 4 Sign 15 Signature and verification The undersigned declares under penalty of	7 b Amount. 7 b Amount. Perjury and other applicable penalties of the law that all of the information ring documents) has been examined by the signatory and is to the best of the
Street N/A City N/A State	7 b Amount. 7 b Amount. Perjury and other applicable penalties of the law that all of the information ring documents) has been examined by the signatory and is to the best of the ction on penalties in the instructions.)
Street N/A City N/A State ZIP Code + 4 Sign 15 Signature and verification The undersigned declares under penalty of submitted in this report (including the information contained in any accompany	7 b Amount. 7 b Amount. Perjury and other applicable penalties of the law that all of the information ring documents) has been examined by the signatory and is to the best of the

Name of Person Filing Stephen T King	File Number U
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested	
8. Name and address of Business (including trade name if any) Name IUPAT JATF Trade Name if any PO Box Bldg Room No if any Street 1750 New York Ave, NW City Washington State DC ZIP Code +4 2000655301	9 Business deals with a Labor Organization X b Trust
10 If 9 b or 9 c is checked give trust or employer's name Name IUPAT	11 a Nature of such dealing instructors educational seminar 6/20-25/2004 Lodging & Meals-IES \$832 30 6/24/2004 Graduation Banquet \$43 49 6/19-25/2004 Airfare-IES \$304 00 11 b Approximate dollar value of such dealing \$1,179 79 12 a Nature of interest held or income received N/A
C Received from any employer (other than an employer covered under parts A and B above)	
or from any labor relations consultant to an employer any payment of money 13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any) Name N/A	or other thing of value 14 a Nature of payment N/A
Trade Name if any N/A P O Box Bidg Room No if any N/A Street N/A City N/A	f 1
State ZIP Code + 4 13 b Is the Business an Employer , or Consultant , ?	14 b Amount of payment